Case 16-03048 Doc 1 Fill in this information to identify your case:	Filed 02/01/16	Entered 02/01/16 17:05:48 age 1 of 60	Desc Main
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)			
Case number (if known)	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13		Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	Jennifer	First name
Write the name that is on	First name A	First name
your government-issued picture identification (for	Middle name	Middle name
example, your driver's license or passport	Sowinski Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last	First name	First name
8 years	Middle name	Middle name
Include your married or maiden names.	widdle flame	wildlie Harrie
madernames.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX- <u>3845</u>	xxx - xx-
Security number or	OR	OR
federal Individual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

JennifeCase 16-03048 ADoc 1 Filed 02\$04486 Entered 02/01/16 11-7:05:48 Desc Main Debtor 1 Page 2 of 60 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names ✓ I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names 5. Where you live If Debtor 2 lives at a different address: 1436 W Jarvis Ave., Apt B Number Street Number Street Chicago Illinois 60626 State City Zip Code City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City State Zip Code City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived Over the last 180 days before filing this petition, I have lived district to file for in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Part 2: Tell the Court About Your Bankruptcy Case 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No. bankruptcy within the last 8 years? Yes. District Case number District Case number District ____ When Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with you, or by a Debtor Relationship to you business partner, or When District Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

JennifeCase 16-03048 ADoc 1 Filed 02 \$ 0 14 1 1 1 6 Entered 02/01/16/147:05:48 Desc Main Page 4 of 60 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any full- or part-time lacksquareName and location of business business? Retro active A sole proprietorship is Name of business, if any a business you operate as an 1436 W Jarvis., Unit B individual, and is not a Number Street separate legal entity such as a corporation, partnership, or LLC. Illinois 60626 If you have more than Chicago Citv State Zip Code one sole proprietorship, use a separate sheet and Check the appropriate box to describe your business: attach it to this Health Care Business (as defined in 11 U.S.C. § 101(27A)) petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? City State Zip Code

Debtor 1

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Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:		bout Deb	tor 2 (S _l	pouse Only in a Joint Case):
You must check one:		ou must chec	ck one:	
counseling agenc	ng from an approved credit y within the 180 days before I filed this on, and I received a certificate of	counselir	ng agency tcy petitio	ng from an approved credit v within the 180 days before I filed this n, and I received a certificate of
Attach a copy of the that you developed	e certificate and the payment plan, if any, with the agency.			certificate and the payment plan, if any, vith the agency.
counseling agenc	ng from an approved credit y within the 180 days before I filed this on, but I do not have a certificate of	I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.		
-	r you file this bankruptcy petition, by of the certificate and payment		T file a cop	you file this bankruptcy petition, y of the certificate and payment
an approved ager services during the	ed for credit counseling services from ncy, but was unable to obtain those he 7 days after I made my request, and nces merit a 30-day temporary waiver nt.	I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.		
attach a separate sl obtain the briefing, v	temporary waiver of the requirement, neet explaining what efforts you made to why you were unable to obtain it before you and what exigent circumstances required	To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.		
•	dismissed if the court is dissatisfied with treceiving a briefing before you filed for	Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.		
receive a briefing w certificate from the	ed with your reasons, you must still ithin 30 days after you file. You must file a approved agency, along with a copy of the eveloped, if any. If you do not do so, your seed.	receive a certificate payment p	briefing wit from the a	ed with your reasons, you must still thin 30 days after you file. You must file a pproved agency, along with a copy of the veloped, if any. If you do not do so, your sed.
Any extension of the and is limited to a m	e 30-day deadline is granted only for cause aximum of 15 days.	Any extension of the 30-day deadline is granted only for cau and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of:		
I am not required counseling becau	to receive a briefing about credit use of:			
☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	☐ Incap	oacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	Disab	oility.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
Active duty.	I am currently on active military duty in a military combat zone.	Activ	e duty.	I am currently on active military duty in a military combat zone.
-	re not required to receive a briefing about ou must file a motion for waiver of credit	If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit		

counseling with the court.

counseling with the court.

JennifeCase 16-03048 ADoc 1 Filed 02\$044486 Entered 02/01/16 /147:05:48 Desc Main Debtor 1 Page 6 of 60 **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded ✓ No. and administrative ٦ Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Jennifer Sowinski Signature of Debtor 2 Signature of Debtor 1

MM / DD / YYYY

Executed on

Executed on 2/1/2016

MM / DD / YYYY

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

X

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

rrect.				
_/s/ Mike Miller Signature of Attorney for Debtor		_ Date	2/1/2016 MM / DD / YYYY	
Mike Miller				
Printed name				
Semrad Law Firm				
Firm name				_
Number	Street			
City	State		Zip Code	
Contact phone		Er	nail address	
Bar number		St	ate	

<u>Doc 1 Filed 02/01/16 Entered 02/0</u>1/16 17:05:48 Desc Main Fill in this information to identify your case: Debtor 1 Sowinski Jennifer First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$2,915.00 1b. Copy line 62, Total personal property, from Schedule A/B \$2,915.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$65.686.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F...... \$65,686.00 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$7.328.58

Official Form 106Sum

5. Schedule J: Your Expenses (Official Form 106J)

Copy your combined monthly income from line 12 of Schedule I.....

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$1,625.00

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Pa	t 4: Answer These Questions for Administrative and Statistical Records										
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?										
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.										
	✓ Yes.										
7.	What kind of debt do you have?										
	Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159.										
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. C this form to the court with your other schedules.	heck this box and submit									
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Copy 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	Official	\$998.20								
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:										
	From Part 4 on Schedule E/F, copy the following:	Total claim									
	9a. Domestic support obligations (Copy line 6a.)	\$0.00									
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00									
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00									
	9d. Student loans. (Copy line 6f.)	\$58,106.00									
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00									
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$0.00									
	9g. Total. Add lines 9a through 9f.	\$58,106.00									

Fill in this	information to identify your case		FIEG 02/01/16 FIII	=1=11112711110	17.05.40 Desi	UMairi	
Debtor 1	Jennifer	А	Sowinski				
	First Name	Middle N	Name Last Name				
Debtor 2 (Spouse,	if filing) First Name	Middle N	Name Last Name				
United Sta	ates Bankruptcy Court for the:	Northern	District of Illinois (State)				
Case nun (If known)	nber		()				
Officia	al Form 106A/B					Check if this is an amended filing	
Sche	dule A/B: Prope	rty				12/1	
category v responsib write your Part 1:	where you think it fits best. Be ble for supplying correct infor name and case number (if kn Describe Each Residen	e as complete and mation. If more sp own). Answer eve ce, Building, L	an asset only once. If an asset only once. If an asset on accurate as possible. If two modes is needed, attach a separary question. and, or Other Real Estatemy residence, building, land, or	arried people are fili ate sheet to this forn te You Own or H	ng together, both are eq n. On the top of any add	ually	
$\overline{\checkmark}$	No. Go to Part 2						
1.1	Yes. Where is the property? Street address, if available, or	other description	What is the property? Check Single-family home		the amount of any secure	laims or exemptions. Put ed claims on Schedule D: nims Secured by Property.	
			Condominium or cooperativ	re	Current value of the entire property?	Current value of the portion you own?	
	Number Street City State	Zip Code	Land Investment property Timeshare Other		Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.		
			Who has an interest in the p Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Other information you wish to	and another to add about this ite	Check if this is co (see instructions) m, such as local		
If you	own or have more than one, list h	ere:					
1.2	Street address, if available, or o	other description	What is the property? Check Single-family home Duplex or multi-unit building		the amount of any secure	laims or exemptions. Put ed claims on Schedule D: nims Secured by Property.	
			Condominium or cooperativ Manufactured or mobile hor		Current value of the entire property?	Current value of the portion you own?	
	Number Street City State	Zip Code	☐ Land ☐ Investment property ☐ Timeshare		Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by	
		<u> </u>	Other Who has an interest in the p Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Other information you wish t property identification number	and another	Check if this is co	mmunity property	

	First Name	Middle Name	Filed 02/01/146 Entered 02/01/146 Document Page 11 of 60	
1.3 Str	eet address, if available, or o		What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
Nu Cit	mber Street y State	Zip Code	Land Investment property Timeshare Other	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
			Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is community property (see instructions)
		ortion you own for a	property identification number: Il of your entries from Part 1, including any entries e	
Dort 2	Describe Vour Vehic	los		
you own to 3. Cars, v	hat someone else drives. If y ans, trucks, tractors, sport u	equitable interest in equitable interest in ou lease a vehicle, als	n any vehicles, whether they are registered or not? It o report it on Schedule G: Executory Contracts and Unex cles	
Do you o you own t 3. Cars, v \ \ \ \ \ \ \ \ \ \ \ \ \ \	wm, lease, or have legal or hat someone else drives. If y ans, trucks, tractors, sport ur o es Make Model: Year: Approximate mileage:	equitable interest in equitable interest in ou lease a vehicle, als	o report it on Schedule G: Executory Contracts and Unexcles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the Current value of the
Do you own the syou own the syo	wwn, lease, or have legal of that someone else drives. If yeans, trucks, tractors, sport uroces Make Model: Year: Approximate mileage: Other information:	equitable interest in ou lease a vehicle, als illity vehicles, motorcy Suzuki Esteem 1996	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$1525.00 \$1525.00
Do you o you own ti 3. Cars, v N V Ye 3.1	wm, lease, or have legal or hat someone else drives. If y ans, trucks, tractors, sport ur o es Make Model: Year: Approximate mileage:	equitable interest in ou lease a vehicle, als illity vehicles, motorcy Suzuki Esteem 1996	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?

Debtor 1	JennifeCase 16-03048 A Doc 1 First Name Middle Name	Filed 02/01/146 Entered 02/01/146 Document Page 12 of 60	வெக்ல 5: <u>48 Desc Main</u>		
3.3	Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?		
4 Wa t Exa		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) er recreational vehicles, other vehicles, and accessories fit, fishing vessels, snowmobiles, motorcycle accessories	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?		
4.1	Yes Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?		
4.2	Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?		
		II of your entries from Part 2, including any entries to	1 91323.00		

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Describe Your Personal and Household Items

D	o you own or ha	ve any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6	. Household goods	and furnishings	
	_	iances, furniture, linens, china, kitchenware	
П	No		
V	Yes. Describe	Used Furniture	\$500.00
	•		\$500.00
	collections	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music ; electronic devices including cell phones, cameras, media players, games	
⊻	No		
	Yes. Describe		
	stamp, coi	ue Ind figurines; paintings, prints, or other artwork; books, pictures, or other art objects; In, or baseball card collections; other collections, memorabilia, collectibles	
Ľ			
ш	Yes. Describe		
		orts and hobbies otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes s; carpentry tools; musical instruments	
✓	No		
П	Yes. Describe		
	•		
		es, shotguns, ammunition, and related equipment	
П	Yes. Describe		
	1. Clothes Examples: Everyday o	clothes, furs, leather coats, designer wear, shoes, accessories	
✓	Yes. Describe	Used Clothing	\$350.00
			·
	2. Jewelry Examples: Everyday je gold, silve	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, r	
	No		
✓	Yes. Describe	misc Jewelry	\$70.00
	3. Non-farm animals Examples: Dogs, cats		<u>v. 0.00</u>
	No		
H	Yes. Describe		
Н	169. Describe		
1	4. Any other person	al and household items you did not already list, including any health aids you did not list	
✓	No		
đ	Yes. Describe		
		lue of all of your entries from Part 3, including any entries for pages you have attached number here	\$920.00

Jennife Case 16-03048 ADOC 1 Filed 02/10/11/16 ALTO 105:48 Desc Main Debtor 1 Document Page 14 of 60 **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes 17.1. Checking account: Byline \$0.00 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ✓ No Institution or issuer name: Yes

% of ownership:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in

an LLC, partnership, and joint venture

Yes. Give specific information about

Name of entity

✓ No

them

Filed 02:01/16 Entered 02:01/16 A-7:05:48 Desc Main JennifeCase 16-03048 ADoc 1 Document Page 15 of 60 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Yes. Give specific information about Issuer name: them.... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans **✓** No Type of account: Institution name: Yes. List each account separately. 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others **✓** No Institution name: Yes.... Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) **✓** No Issuer name and description: Yes....

Debt	or 1	JennifeCas First Name	se 16	6-03048	ADOC 1 Middle Name		02 \$04/ \$46 cumente		ered	1/16 #	k76i05: <u>48</u>	De	esc Main
24.				ti on IRA, in a 529A(b), and		a qualified	d ABLE progra	m, or u	nder a qualified	d state t	uition program	1.	
		No In Yes	stitutio	n name and d	lescription. Sep	parately file	the records of a	iny intere	ests.11 U.S.C. § s	521(c):			
		_											
25.		sts, equitabl			ts in property	(other tha	an anything lis	ted in li	ne 1), and right	ts or po	wers		
		No Yes. Describ	e										
26.							intellectual pro		eements				
		No Yes. Describ		,			•						
27.		enses, franci	hises,		eneral intangil								
		No		nits, exclusive	e licenses, coo	perative as	ssociation noidir	igs, iiquo	or licenses, profe	essionai	licenses		
	Ц	Yes. Describ			_								
Mor	ney (or propert	y ow	ed to you'	?							p	Current value of the portion you own? On not deduct secured laims or exemptions.
28.	Тах і	efunds owe	d to y	ou									
	<u> </u>												
	П,	Yes. Give spe about th		formation cluding wheth	er						ederal:		
		you alre	ady file	ed the returns							tate:		
29.		ily support			ony spousal sur	oport child	support mainte	nance c	livorce settlemen		ocal:		
		No		р сал. а	,, 00000000	- port, ora	очерон, папи			, р. оро	,		
	Ħ		acific in	formation						A	limony:		
		res. Give spe	JOHIO III	ioimation						M	laintenance:		
										S	upport:		
										D	ivorce settlemer	nt:	
										P	roperty settleme	nt:	
30.		<i>nples:</i> Unpaid	l wage:	-			•	pay, vac	ation pay, worker	rs' compe	ensation,		
	✓ I	No											
		Yes. Describe	Э										·

Deb	tor 1	JennifeCase 16 First Name	6-03048	ADOC 1 Middle Name	Filed 02: Docum		Entered 02/01 Page 17 of 60	и 11.6 Лити 105: <u>48 С</u>	Desc Main
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance								
		No Yes. Name the insur of each policy and lis		/	Company name:			Beneficiary:	Surrender or refund value:
32.	If you	interest in propert u are the beneficiary erty because someo No Yes. Describe	of a living trus				policy, or are currently ent	itled to receive	
33.		ms against third pa					ade a demand for payn	nent	
		No Yes. Describe]
34.		er contingent and et off claims	unliquidated	claims of ev	very nature, inc	luding co	unterclaims of the deb	or and rights	_
		No Yes. Describe							
35.	_	financial assets yo	ou did not alre	eady list					-
	=	Yes. Describe] -
36.			-				es for pages you have		
Part	5:	Describe Any E	Business-R	elated Pro	pperty You O	wn or Ha	ave an Interest In.	List any real estate i	in Part 1.
37.	Do y	ou own or have ar	ny legal or eq	uitable inter	est in any busin	ess-relate	d property?		
		No. Go to Part 6. Yes. Go to line 38.							Current value of the portion you own? Do not deduct secured claims or exemptions
38.	Acc	ounts receivable or	commission	s you alread	ly earned				
		No Yes. Describe							1
39.		ce equipment, furn mples: Business-rela			nodems, printers,	copiers, fa	x machines, rugs, telepho	ones, desks, chairs, electro	nic devices
		No Yes. Describe	10.8.5 Mac Le	pord					\$170.00

Debt	First Name	6-03048 ADO Middle N	^{lame} Documetht ^{me} l	<u>Entered</u>	esc Main
40.	Machinery, fixtures, eq	juipment, supplies y	ou use in business, and tools of	your trade	
	✓ No				
	Yes. Describe				
41.	Inventory				
	✓ No				
	Yes. Describe				
42.	Interests in partnersh	ips or joint ventures	S		
	✓ No				
	Yes. Give specific		Name of entity:	% of ownership:	
	information about				
	them				
43 (Customer lists, mailing	lists, or other comp	uilations		
.0.		note, e. etner cemp	Mations		
	No No No your lists in	veludo porcopally ident	ifiable information (as defined in 11	115 C & 101//11/0\)2	
	103. Do your lists in	cidde personally ident	inable information (as defined in 11	0.0.0. § 101(4174)):	
	☐ No				
	Yes. Desci	ribe			
44.	Any business-related p	property you did not	already list	<u> </u>	
	✓ No				
	Yes. Give specific				<u> </u>
	information				
		•	m Part 5, including any entries for	or pages you have attached	170.00
	December Asset				
Part		n interest in farmland, li		operty You Own or Have an Interest In	
46.	Do you own or have a	ny legal or equitable	e interest in any farm- or comme	cial fishing-related property?	
	✓ No. Go to Part 7.				Current value of the portion you own?
	Yes. Go to line 47.				Do not deduct secured
					claims
47.	Farm animals				or exemptions
	Examples: Livestock, po	ultry, farm-raised fish			
	✓ No				
	Yes. Describe				
	_				

Deb	tor 1	JennifeCase 16 First Name	5-03048	ADOC 1 Middle Name	Filed 02\$03dski		/01/16 <i>(1</i> 47:05: <u>48</u> 50	Desc	Main
48.	Cro	ps-either growing	or harvested		Boodment	r age 10 or c	,,		
	✓	No							
		Yes. Describe						_	
49.	Fari	ا m and fishing equip	oment, imple	ments, mach	inery, fixtures, and to	ols of trade			
	✓	No							
		Yes. Describe						_	
50.	Fari	m and fishing supp	lies, chemica	als, and feed					
	✓	No							
		Yes. Describe							
51.		farm- and commer mples: Livestock, pou			ty you did not already	list			
	✓	No							
		Yes. Describe						_	
			-		6, including any entri				
								<u>L</u>	
Part					ave an Interest in	That You Did Not	List Above		
53.		ou have other prop mples: Season tickets			not already list?				
	✓			·					
	_	Yes. Give specific							
	_	information							
54. A	dd th	e dollar value of all	of your entr	ies from Part	7. Write that number	nere		.•	
Part	8.	List the Totals o	of Fach Pa	rt of this F	orm				
rare	o .		,, <u></u>		····				
55. F	Part 1	: Total real estate, I	ine 2				>		
56. p	oart 2	total vehicles, line	5		\$1525	.00			
57. P	art 3	: Total personal and	d household	items, line 15					
58. P	art 4	: Total financial ass	ets, line 36		φο20.0				
59. F	Part 5	i: Total business-re	lated proper	ty, line 45	£170.0	<u> </u>			
		i: Total farm- and fi		•	\$170.0 ne 52				
		: Total other prope	_						
			-						
02. 1	olai	personal property.	∩uu III I E S 30 l	inough on	\$2615	.00	Copy personal property to	otal ▶	+ \$2615.00
									\$2615.00
62 T	otal (of all proporty on S	shadula A/R	Add ling 55 I	lina 62				φ2013.00

Filli	in this informa	Case 16-03048 ation to identify your case:	Doc 1 Filed 0	2/01/16 Entered 02/0	1/16 17:05:48	Desc Main
Deb	otor 1	Jennifer First Name	A Middle Name	Sowinski Last Name		
	otor 2 ouse, if filing)		Middle Name	Last Name		
Unit	ted States Ba	nkruptcy Court for the:	Northern	District of Illinois		
	se number nown)			(State)		
Of	ficial F	orm 106C			1	Check if this is a amended filing
Sc	hedule	C: The Prop	erty You Clai	m as Exempt		12/1
s to exer exer exer orop	o state a s mpted up eive certai mption of perty is de t1: Identi Which set	pecific dollar amour to the amount of an in benefits, and tax-100% of fair market etermined to exceed the Property You of exemptions are you de claiming state and federal exemptions.	and as exempt. Alternative applicable statutors applicable statutors applicable statutors applicable statutors applicable statutors applicable statutors applicable statutors. It is a statutor applicable statutors applicable statutors applicable statutors. It is a statutor applicable statutors applicabl	atively, you may claim the fory limit. Some exemptions unds—may be unlimited in the limits the exemption to exemption would be limited even if your spouse is filing with you.	ull fair market value—such as those for dollar amount. How a particular dollar is to the applicable s	r health aids, rights to wever, if you claim an amount and the value of the
			nd line Current value of	·		cific laws that allow exemption
		le A/B that lists this prop		Check only one box for each ex		
			Copy the value from Schedule A/B	n		
	Brief		\$0.00			735 ILCS 5/12-1001(b)
	description: Line from Schedule A	Byline /B: 17	\$0.00	✓ 100% of fair market value, applicable statutory limit	up to any	
	Brief		\$500.00			735 ILCS 5/12-1001(b)
	description: Line from Schedule A		φ300.00	\$500.00 100% of fair market value, applicable statutory limit		
3.	(Subject to a	adjustment on 4/01/16 and		,,	,	

No Yes

Debtor 1 Jennife Case 16-03048 A Doc 1 Filed 02 104/146 Entered 02/104/146 (14-76)05:48 Desc Main Document Plane Page 21 of 60

Additional Page

•	ion of the property and line A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you cla Check only one box for each exempt	·
Brief description:	Used Clothing	\$350.00	\$350.00	735 ILCS 5/12-1001(a)
Line from Schedule A/B:	11		100% of fair market value, up to a applicable statutory limit	any
Brief description:	Suzuki, Esteem	\$1,525.00	\$1.525.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B:	03		100% of fair market value, up to a applicable statutory limit	any
Brief description:	misc Jewelry	\$70.00	\$70.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	12		100% of fair market value, up to a applicable statutory limit	any
Brief description:	10.8.5 Mac Lepord	\$170.00	\$170.00	735 ILCS 5/12-1001(d)
_ine from Schedule A/B:	39		100% of fair market value, up to a applicable statutory limit	any
Brief description:	PC Desktop	\$100.00	\$100.00	735 ILCS 5/12-1001(d)
_ine from Schedule A/B:	39		100% of fair market value, up to a applicable statutory limit	any
Brief description:	Photo Printer HP Photo smart	\$200.00	\$200.00	735 ILCS 5/12-1001(d)
Line from Schedule A/B:			100% of fair market value, up to a applicable statutory limit	any

Fill in this informa	Case 16-03048 ation to identify your case:	Doc 1 Filed (02/01/16	Entered 02/01/	16 17:05:48	Desc Main	
Debtor 1	Jennifer First Name	A Middle Name	Sowins Last N				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last N	ame			
	nkruptcy Court for the: N	Northern	District of Illi	inois State)			
Case number (If known)							
	orm 106D			_		am	eck if this is ar ended filing
Schedu	le D: Credito	rs Who Hav	e Clair	ns Secured	by Prope	rty	12/1
correct inforr	ete and accurate as p nation. If more space top of any additional	e is needed, copy t	he Addition	al Page, fill it out, r	number the entrie	·	
No. Ch	ditors have claims secured eck this box and submit this Il in all of the information bel	form to the court with you	r other schedule	s. You have nothing else t	o report on this form.		
Part 1: List A	II Secured Claims						
claim. If mor	ured claims. If a creditor has e than one creditor has a pa the claims in alphabetical c	articular claim, list the other	er creditors in Pa		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any

Fill in	this informa	Case 16-03048		Filed 02	2/01/16	Entered	02/01/16	17:05:48	B Desc	Main	
Debte	or 1	Jennifer First Name	А	lle Name	Sowins Last Na		_				
Debto (Spou		First Name	Middl	lle Name	Last Na	ame					
		nkruptcy Court for the:	Northern		District of Illi	nois state)	_				
(If knc		400E/E					_		□ Chor	ok if this is an	amended filing
		orm 106E/F le E/F: Cre	ditors \	Who H	ave Hi	nsecur	ed Cla	ime	Шспес	jk ii tilis is ait	12/15
party t 106A/I are lis the bo	to any exect B) and on S ted in Sche exes on the	and accurate as possibutory contracts or une Schedule G: Executory edule D: Creditors Who left. Attach the Contir Il of Your PRIORIT	xpired leases to Contracts and Hold Claims S Juation Page to	hat could resuld Unexpired Le Secured by Proposition of this page. Or	ılt in a claim. eases (Officia roperty. If mo	Also list execu al Form 106G). ore space is ne	utory contracts Do not include eded, copy the	s on <i>Schedu</i> e any credito e Part you n	le A/B: Propors with particles with particles with particles with particles with the proportion of the	erty (Officia ally secured , number the	Il Form I claims that e entries in
1.		ditors have priority unso to Part 2.	secured claims	against you?							
ı	identify wha possible, list Part 1. If mo	our priority unsecured t type of claim it is. If a cla the claims in alphabetic ore than one creditor hold anation of each type of c	aim has both pric al order accordir ds a particular cl	ority and nonprion ng to the credito laim, list the oth	ority amounts, or's name. If yo er creditors in	list that claim he ou have more the Part 3.	ere and show bo nan two priority	oth priority an	d nonpriority a	amounts. As r	much as
									Total claim	Priority amount	Nonpriority amount

JennifeCase 16-03048 ADoc 1 Filed 02504/466 Entered 025/01/46 (4.7:05:48 Desc Main Debtor 1 Documernt Page 24 of 60 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 Capital One \$6,856.00 Last 4 digits of account number 9438 Nonpriority Creditor's Name Po Box 30281 When was the debt incurred? 12/1/2000 Street Number As of the date you file, the claim is: Check all that apply. Contingent Salt Lake City Utah 84130 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No Yes 4.2 MIDLANDMCM \$518.00 Last 4 digits of account number 8836 Nonpriority Creditor's Name 2365 Northside Drive # 300 When was the debt incurred? 12/16/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent 92108 San Diego California Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No Yes 4.3 Navient \$34,522.00 Last 4 digits of account number 0613 Nonpriority Creditor's Name 1002 ARTHUR DR When was the debt incurred? 6/1/1996 Number Street As of the date you file, the claim is: Check all that apply. Contingent LYNN HAVEN Florida 32444 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt

✓ No Yes

Is the claim subject to offset?

Other. Specify

JennifeCase 16-03048 ADoc 1

Filed 02:601/16 Entered 02:401/16 /147:405:48 Desc Main Debtor 1 Document Page 25 of 60 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 Navient \$14,659.00 Last 4 digits of account number _ Nonpriority Creditor's Name 1002 A<u>RTHUR DR</u> When was the debt incurred? 3/1/2007 Number Street As of the date you file, the claim is: Check all that apply. Contingent LYNN HAVEN Florida 32444 Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only ◪ Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Other. Specify Is the claim subject to offset? **✓** No Yes 4.5 Navient \$8,925.00 Last 4 digits of account number Nonpriority Creditor's Name 1002 ARTHUR DR When was the debt incurred? 10/1/2006 Number Street As of the date you file, the claim is: Check all that apply. Contingent LYNN HAVEN 32444 Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Ͷ Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Other. Specify Is the claim subject to offset? No Yes 4.6 SYNCB/GUITAR CENTER \$206.00 Last 4 digits of account number Nonpriority Creditor's Name 950 FORRER BLVD When was the debt incurred? 1/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent **KETTERING** 45420 Ohio Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed

✓

|**~**| No Yes

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

Check if this claim relates to a community debt

Type of NONPRIORITY unsecured claim:

you did not report as priority claims

Obligations arising out of a separation agreement or divorce that

Debts to pension or profit-sharing plans, and other similar debts

Student loans

Other. Specify

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6j. Total. Add lines 6f through 6i.

Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the 6c. Claims for death or personal injury while you were intoxicated 6c. \$0.00 6d. Other. Add all other priority unsecured claims. Write that \$0.00 amount here. 6e. Total. Add lines 6a through 6d. \$0.00 **Total claims** \$58,106.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or divorce 6g. that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. 6i. Other. Add all other nonpriority unsecured claims. Write that 6i. amount here.

\$65,686.00

6j.

		Case 16-0304	.8 Doc 1 I	=iled 02/01/16	Entered (<u>12/0</u> 1/16 17:05:48	Desc Main
Fill in th	nis informa	ation to identify your cas				1,10 11.00.10	Dood Main
Debtor	1	Jennifer	А	Sow	nski		
		First Name	Middle N		Name	_	
Debtor	_					_	
(Spous	e, if filing)	First Name	Middle N	lame Last	Name		
United	States Ba	nkruptcy Court for the:	Northern	District of	Illinois		
					(State)	_	
Case n						_	
Offic	cial F	orm 106G					Check if this is a amended filing
Sch	edule	e G: Execut	ory Contr	acts and U	nexpired	Leases	12/1
space is case nu 1. Do	s needed, imber (if I you ha	, copy the additional p known). ve any executory	oage, fill it out, num	ber the entries, and a	ttach it to this pa		ing correct information. If more onal pages, write your name and
✓	Yes. Fill in	n all of the information b	elow even if the cont	racts or leases are liste	d on <i>Schedule A/E</i>	3: Property (Official Form 106A	/B).
						tate what each contract or le nples of executory contracts ar	ase is for (for example, rent, d unexpired leases.
	Person	or company with who	m you have the cor	ntract or lease		State what the contrac	t or lease is for
2.1 E	Epic Enter	prises				Residential Lease,	
1	Name					Debtor is Lessee, Month to month	
1	1436 W Ja	rvis Ave				World't to Morial	
_	Number	Street					
<u>(</u>	Chicago	III	linois	60626			
(City	S	tate	Zip Code			

		Case 16-0304	8 Doc 1 Filed (12/01/16 Entered	<u>02/0</u> 1/16 17:05:48	Desc Main
Fill	in this informa	ation to identify your case		ZWIVIO I MEIEU	02701/10 17:03:40	Desc Main
De	btor 1	Jennifer First Name	A Middle Name	Sowinski Last Name		
_	btor 2 oouse, if filing)		Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	Northern	_ District of Illinois (State)		
	se number (nown)			(Otate)		
						Check if this is a amended filing
		<u>form 106H</u>				
<u>Sc</u>	chedule	H: Your Co	odebtors			12/1:
evei	Do you have No Yes	e any codebtors? (If yo	ou are filing a joint case, do no	t list either spouse as a codebt	or.)	ase number (if known). Answer ies include Arizona, California, Idaho,
۷.	Louisiana, No. Go	evada, New Mexico, Pue to line 3.	erto Rico, Texas, Washington,	and Wisconsin.)	uriny property states and territori	les include Anzona, Camornia, Idano,
	✓ No		tate or territory did you live?	Fil	l in the name and current addres	ss of that person.
		Name of your spouse, for	ormer spouse, or legal equival	ent	_	
		Number Street			_	
		City	State	Zip Code	_	
3.	as a codebt	or only if that person i	s a guarantor or cosigner. I	Make sure you have listed th		the person shown in line 2 again ficial Form 106D), <i>Schedule E/F</i> olumn 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

Case number Middle Name Last Name A supplement showing post-petition chapter exporises as of the following date: Northern District of Illinois Replayed	Fill in thi	s information to identify	your case:			1/16 17	:05:48	Desc Ma	in	
Pirst Name	51.4				ige 23 or	00				
Debtor 2 Spouse, if filling) First Name Middle Name Last Name District of Illinois (State) MM / DD / YYYY Difficial Form 106I Schedule I: Your Income 12 12 13 14 15 15 15 15 16 16 17 16 17 17 17 18 18 19 19 19 19 19 19 19 19	Debtor 1					-				
Case number Midde Name	D 1 / 0	First Name	Middle Name	Last Name)		Check if this	is:		
United States Bankruptcy Court for the: Northern		filing) First Name	Middle Neme	Loot Name		-	☐ An amen	ded filina		
Case number	(Opouse, ii	riisi name	Middle Name	Last Name	;		=	ŭ		-h
Difficial Form 106I Schedule I: Your Income Let as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, not clude information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional arges, write your name and case number (if known). Answer every question. Part 1: Describe Employment I. Fill in your employment information. Let be provide the provided attach a separate page with information. Let be provided the provided to the provided to the provided attach a separate page with information about additional employers. Let be provided the provided to the provid	United Sta	tes Bankruptcy Court for the:	Northern			-				chapter 13
Schedule I: Your Income It is as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, clude information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If you are separated and your spouse is not filling with you, do not include nor more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Employer status Debtor 1 Debtor 2 Employed Not Employed Not Employed Not Employed Care taker Employer's name Great Paragon Heaithcare Employer's address City State Zip Code How long employed there? Chicago Illinois 60645 City State Zip Code How long employed there? Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach		per				_	MM / DD	O / YYYY		
te as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, clude information about your spouse. If you are separated and your spouse is not filing with you, do not include formation about your spouse. If you are separated and your spouse is not filing with you, do not include and ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate sheet to this form. On the top of any additional and the properties of the properties	Officia	al Form 1061								
esponsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, of not include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. Employment status Employed Debtor 1 Debtor 2 Employed Not Employed Not Employed Not Employed Care taker Employer's name Employer's name Employer's name Employer's address or self-employed work. Cocupation may include student or homemaker, if it applies. Chicago Illinois Go645 City State Zip Code Timonth Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach	Sched	dule I: Your Inc	ome							12/15
Find pour employment information. Employment status Employed Employed Employed Mot E	ages, w	rite your name and ca	se number (if known). A			leet to this i	OIIII. OII II	e top or an	y additio	
Fingloyed Employed Employed Employed Employed Employed Employed Employed Not E	1.	Fill in your employment		Debtor 1			Debtor 2			
If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's address Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Chicago Illinois 60645 City State Zip Code City State Zip Code Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach		information.		_						
job, attach a separate page with information about additional employers. Care taker		If you have more than one	Employment status	✓ Employed			Employ	ed		
information about additional employers. Employer's name Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Chicago Illinois 60645 City State Zip Code How long employed there? Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach				Not Employ	/ed		☐ Not Em	ployed		
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Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Employer's address 2640 W Touhy Ave., Ste 206 Number Street Chicago Illinois 60645 City State Zip Code Temployed work. City State Zip Code Formally income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach			Occupation	Care taker						
or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? City State Zip Code Timonth Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach		стрюуста.	Employer's name	Great Paragon	Healthcare					
Self-employed work. Occupation may include student or homemaker, if it applies. Chicago Illinois 60645 City State Zip Code How long employed there? Timonth Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach		•	Employer's address	2640 W Touhy	Ave., Ste 206					
student or homemaker, if it applies. Chicago Illinois 60645 City State Zip Code How long employed there? 1 month Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach					·		Number Stree	et		
Or homemaker, if it applies. Chicago Illinois 60645 City State Zip Code How long employed there? I month The state Tip Code The state Tip Cod		•								
Chicago Illinois 60645 City State Zip Code How long employed there? Tity State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach										
How long employed there? 1 month		or nomemaker, in it applies.					0.11	01-1	- 7:- OI	
Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach				City	State	Zip Code	City	State	3 ZIP Code	Э
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach			How long employed there?	1 month						
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach	Part 2	Give Details About M	Monthly Income							
are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach										
If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach		-	date you file this form. If you ha	ave nothing to rep	oort for any line	e, write \$0 in the s	space. Include	your non-filing	spouse unle	ess you
	•		re than one employer, combine the	ne information for	all employers	for that person or	n the lines belo	w. If you need	more space.	, attach
For Debtor 2 or		e sheet to this form.				·				
For Debtor 1 For Debtor 2 or non-filing spouse					For	Debtor 1				
 List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. \$450.00 					2	\$450.00				
3. Estimate and list monthly overtime pay. 3 + \$0.00		, .	, ,		3	+ \$0.00				

4. Calculate gross income. Add line 2 + line 3.

\$450.00

Entered @2401446 47:05:48 Desc Main Documentame Page 30 of 60 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4. \$450.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$71.30 5b. Mandatory contributions for retirement plans 5b. \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5g. Union dues 5g. 5h. Other deductions. Specify: 5h. + \$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$71.30 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$378.70 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$960.70 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce \$0.00 settlement, and property settlement. 8c. 8d. Unemployment compensation \$0.00 8d. 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies \$0.00 Specify: 8f. 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. + \$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$960.70 10. Calculate monthly income. Add line 7 + line 9. 10. \$1,339,40 \$1.339.40 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: Voluntary Household Contributions \$0.00 11. + 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies \$1,339.40 Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No Yes. Explain:

Filed 02/04/46

Jennifer Case 16-03048 A Doc 1

	Case 16-0304		02/01/16 Entered 02/0	1/16 17:05:48	Desc Mai	in
Fill in this infor	mation to identify your cas	e:	- U			
Debtor 1	Jennifer	Α	Sowinski			
	First Name	Middle Name	Last Name			
Debtor 2	a) =:			Check if this is:		
(Spouse, it filin	g) First Name	Middle Name	Last Name	An amended filing		
United States I	Bankruptcy Court for the:	Northern	District of Illinois	A supplement show		•
Case number			(State)	expenses as of the	following date	:
(If known)				MM / DD / YYYY		
				ן ווואו / טט / זיזיז		
Official	Form 106J					
Schodu	le J: Your Ex	nancac				12/1
Jeneuu	ie J. Tour Lx	penses				12/1
nformation. If			e filing together, both are equally form. On the top of any additiona			nber
	cribe Your Househo	old				
1. Is this a joi						
_	o to line 2					
Yes. D	oes Debtor 2 live in a se	eparate nousenoid?				
[No					
[Yes. Debtor 2 must file	Official Forms 106J-2, Exper	nses for Separate Household of Debto	or 2.		
2. Do you hav	ve dependents? ✓ N	lo				
Do not list D	Debtor 1 and	es. Fill out this information for	Dependent's relationship to	Dependent's	Does deper	ndent live
Debtor 2.	ea	ach dependent	Debtor 1 or Debtor 2	age	with you?	
3. Do your ex	penses include					
•	of people other	0				
than yourself an	d vour	es				
dependent	•					
Part 2: Esti	mate Your Ongoing	Monthly Expenses				
			vou ere voine thie form ee e com	loment in a Chanter 42 ac		
expenses as	of a date after the bankr		you are using this form as a supp oplemental Schedule J, check the	•	•	•
applicable da	te.					
		ash government assistance on <i>Schedule I: Your Incom</i>			Y	our expenses
		enses for your residence. Ir	nclude first mortgage payments and			\$350.00
•	or the ground or lot. 4.				4.	_
	luded in line 4:					
4a. Real e	state taxes				4a	\$0.00
4b. Prope	rty, homeowner's, or renter	r's insurance			4b.	\$0.00
4c. Home	maintenance, repair, and u	pkeep expenses			4c.	\$0.00

\$0.00

4d.

4d. Homeowner's association or condominium dues

ebtor 1 Jennife Case 16-03048 ADOC 1 Filed 02:1011/1366 Entered 02:1011/136 (12:17:05:48 Desc Main

Document Page 32 of 60 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$200.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$85.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$400.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$150.00 9. 10. Personal care products and services \$150.00 10. 11. Medical and dental expenses \$25.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$200.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$65.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _ \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$0.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes 20b. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses 20d. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

Debtor 1 Je	ennifeCase 16-03048	ADoc 1	Filed 02\$044\$16	Entered_024014/1	L6 @L√7005: <u>48 </u> □	<u>Desc Main</u>	
Fir	rst Name	Middle Name	Documetht ende	Page 33 of 60			
21. Other. Sp	pecify:			J	21		\$0.00
22. Calculate	e your monthly expenses.						\$1,625.00
22a. Add	lines 4 through 21.					_	\$0.00
22b. Cop	y line 22 (monthly expenses for	Debtor 2), if an	y, from Official Form 106J	-2		_	\$1,625.00
22c. Add	line 22a and 22b. The result is y	our monthly ex	penses.		22.		
23. Calculate	e your monthly net income.						
23a. Cop	y line 12 (your combined monthl	ly income) from	Schedule I.		23a		\$1,339.40
23b. Copy	y your monthly expenses from lin	ne 22 above.			23b		\$1,625.00
23c. Subt	tract your monthly expenses fron	n your monthly i	income.				(\$285.60)
The	e result is your monthly net incor	ne.			23c		(, , , , , ,
24. Do you 6	expect an increase or decreas	se in your exp	enses within the year aft	er you file this form?			
For 21/21	male, de veu evaest te finish neu	in a for value oo	loon within the year or do	rail avenue et value			
	mple, do you expect to finish pay Je payment to increase or decre		,				
_	, , , , , , , , , , , , , , , , , , , ,			3.3			
✓ No							
Yes							
	Explain here:						
	•						

		Case 16-03048	B Doc 1 Filed 0	2/01/16 Enter	ed 02/01/16 17:05:48	Desc Main
Fill	in this inform	ation to identify your case		<u> </u>	1/10 17:00:40	Description
Del	otor 1	Jennifer	А	Sowinski		
		First Name	Middle Name	Last Name		
	otor 2 ouse, if filing	First Name	Middle Name	Last Name		
Uni	ted States Ba	ankruptcy Court for the:	Northern	District of Illinois		
Cas	se number			(State)		
	nown)					
Of	ficial F	orm 106De	<u>c</u>			Check if this is an amended filing
De	clarat	ion About aı	n Individual De	btor's Sched	dules	12/1
lf tw	o married p	eople are filing togethe	r, both are equally responsi	ble for supplying corre	ct information.	
prop 1519		d in connection with a				ing property, or obtaining money or s, or both. 18 U.S.C. §§ 152, 1341,
	Did you pa	y or agree to pay some	one who is NOT an attorney	to help you fill out ban	kruptcy forms?	
	✓ No					
	Yes. N	lame of person		Attach Bankrupto Signature (Officia	cy Petition Preparer's Notice, Declara al Form 119).	ation, and
		alty of perjury, I declare	that I have read the summa	ry and schedules filed	with this declaration and	
×	/s/ Jennife	r Sowinski		×		
	Signature of	Debtor 1		Signa	ture of Debtor 2	
	Date 2/1/20			Date		
	MM/I	DD/YYYY			MM/DD/YYYY	

Fill-	in this i		ase 16-0304 to identify your cas		Filed 02/01/16	Entered 02/	01/16 17:05:48	Desc Main
	otor 1	<u>Jer</u>	nifer	А	Sowinsk			
	otor 2		st Name	Middle	Name Last Nar	me 		
		f filing) Firs		Middle				
			iptcy Court for the:	Northern	District of Illin (Sta			
	se numl nown)	ber						
Of	ficia	al Foi	m 107					Check if this is a amended filing
				ial Affairs	for Individua	ls Filing f	or Bankrupt	CY 12/1
								ring correct information. If more er (if known). Answer every question
					s and Where You Live		name and case nambe	i (ii kilowii). Allawei every questioi
1.					s and where too Live	ed Deloie		
1.	w	Married	current marital st	atus :				
	✓	Not marr	ied					
2.	Dur	ring the la	st 3 years, have yo	u lived anywhere	other than where you live	now?		
	V	No						
	Ш	Yes. List	all of the places you	ived in the last 3 ye	ars. Do not include where yo	ou live now.		
		Debtor 1	:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
						Same as D	ebtor 1	Same as Debtor 1
		Number	Street		- From	Number Street	<u> </u>	From
					To		· 	To
		O:h :	Ctata	7:- O-d-	_	C:t.	Chata Zia C	- da
		City	State	Zip Code		City Same as D	State Zip C ebtor 1	Same as Debtor 1
					— From			From
		Number	Street		— From To	Number Street	(From To
		City	State	Zip Code	_	City	State Zip C	ode
3.				•			•	(Community property states and
	_		e Arizona, California	, Idano, Louisiana,	Nevada, New Mexico, Puer	to Rico, Texas, was	nington, and wisconsin.)	
		lo ′es. Make s	sure you fill out Sche	dule H: Your Codel	otors (Official Form 106H).			

JennifeCase 16-03048 ADoc 1 Filed 02501/16 Entered 02501/166/147:05:48 Desc Main Debtor 1 Page 36 of 60 Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Gross income Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$625.00 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: ✓ Operating a business Operating a business Wages, commissions, Wages, commissions, \$11000.00 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2015 Operating a business Operating a business Wages, commissions, Wages, commissions, \$5442.00 For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2014 Operating a business Operating a business 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details.

	Deptor 1		Deptor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:				
For last calendar year: (January 1 to December 31,		\$2016.00		
For the calendar year before that: (January 1 to December 31,				

Debtor 1 Jennife Case 16-03048 ADOC 1 Filed 02/101/146 Entered 02/101/146 (14/7):05:48 Desc Main

First Name Middle Name Documet Name Page 37 of 60

List Certain Payments You Made Before You Filed for Bankruptcy

Part 3:

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ✓ No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or City State Zip Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or vendors City State Zip Code Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or vendors City State Zip Code

Other

JennifeCase 16-03048 ADoc 1 Filed 02:01/146 Entered 02:401/146 /147:05:48 Desc Main Debtor 1 Document Page 38 of 60 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1 Jennife Case 16-03048 ADOC 1 Filed 02 10 11/15/16 Entered 02 10 11/15/16 (11/15) 15:48 Desc Main Document Plane Page 39 of 60

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

	n 1 year before you filed for bankruptcy, w I such matters, including personal injury cases es.					
	lo ⁄es. Fill in the details.	Natura of the core	Count on co			Status of the case
	Case title	Nature of the case	Court or ag	ency		
	Case title		Court Name			Pending
	Case number		Court Name			On appeal
	Case number		Number Stre	eet		- Concluded
			City	State	Zip Code	_
	Case title		J. Oiky	Olato	2.5 0000	Pending
			Court Name	<u> </u>		On appeal
	Case number					- Concluded
			Number Stre	eet		Concidued
			City	State	Zip Code	_
	Yes. Fill in the information below.	Describe the pro				
	Creditor's Name	Explain what ha			Date	Value of the property
	Creditor's Name Number Street				Date	
		Explain what ha			Date	
		Explain what ha	ppened repossessed.		Date	
	Number Street	Explain what hat property was Property was Property was	ppened repossessed. foreclosed. garnished.		Date	
	Number Street	Explain what ha	repossessed. foreclosed. garnished. attached, seized, o	r levied.		property
	Number Street	Explain what hat property was Property was Property was	repossessed. foreclosed. garnished. attached, seized, o	r levied.	Date	
	Number Street City State Zip Co	Explain what ha	repossessed. foreclosed. garnished. attached, seized, o	r levied.		Value of the
	Number Street	Explain what ha	repossessed. foreclosed. garnished. attached, seized, o	r levied.		Value of the
	Number Street City State Zip Co	Explain what hat property was Property was Property was Describe the pro	repossessed. foreclosed. garnished. attached, seized, o	r levied.		Value of the
	Number Street City State Zip Co	Explain what hat property was Property was Property was Describe the pro	repossessed. foreclosed. garnished. attached, seized, o	r levied.		Value of the
	Number Street City State Zip Co	Explain what ha Property was Property was Property was Property was Property was Explain what ha Property was	ppened repossessed. foreclosed. attached, seized, o pperty ppened repossessed. foreclosed.	r levied.		Value of the

Debt	or 1		<u>d 02\$01/146 Entered </u> 02/01/116 /14ନ୍2:05: pcumentem Page 40 of 60	48 Desc	<u>Main</u>
11.		nin 90 days before you filed for bankruptcy, did any bunts or refuse to make a payment because you owe No Yes. Fill in the details.	creditor, including a bank or financial institution, set of	f any amounts fr	om your
	_		Describe the action the creditor took	Date action was taken	Amount
		Creditor's Name			
		Number Street			
	140.1	City State Zip Code	Last 4 digits of account number: XXXX-		
12.	rece	iver, a custodian, or another official?	f your property in the possession of an assignee for the	e benefit of credi	tors, a court-appointed
		No Yes			
		List Certain Gifts and Contributions			
13.	vvii	No	give any gifts with a total value of more than \$600 per p	oerson?	
	Ħ				
	ä	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	Describe the gifts	•	Value
		Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	Describe the gifts	•	Value
		Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts	•	Value
		Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts	•	Value
		Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code	Describe the gifts	•	Value
	Ö	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code Person's relationship to you	Describe the gifts	•	Value
		Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code Person's relationship to you Person to Whom You Gave the Gift Number Street	Describe the gifts	•	Value
		Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code Person's relationship to you Person to Whom You Gave the Gift Number Street City State Zip Code	Describe the gifts	•	Value
		Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code Person's relationship to you Person to Whom You Gave the Gift Number Street	Describe the gifts	•	Value

	That Name	ocument" Page 41 of 60		
14. Wit		ى I give any gifts or contributions with a total value of mo	re than \$600 to ar	ny charity?
	No			
넴	Yes. Fill in the details for each gift or contribution.			
ш	Gifts with a total value of more than \$600	Describe the gifts	Datas vau	Value
	per person	Describe the girts	Dates you gave the gifts	value
	P. 1.		3	
	Charity's Name	_		
	Chantys Name			
		_		
	Number Street	-		
	City State Zip Code	_		
			_	
art 6:	List Certain Losses			
5. Witl	hin 1 year before you filed for bankruptcy or since	you filed for bankruptcy, did you lose anything because	of theft, fire, othe	r disaster, or
	nbling?	, ou mou lot admirapio,, and , ou look an, annig accused	oo., o, o	
뇓	No			
Ц	Yes. Fill in the details.			
	Describe the property you lost and	Describe any insurance coverage for the loss	Date of your	Value of property lost
	how the loss occurred	Include the amount that insurance has paid. List pending	loss	
		insurance claims on line 33 of Schedule A/B: Property.		
	List Certain Payments or Transfers			
□	No	dit counseling agencies for services required in your bankrupt		
✓	Yes. Fill in the details.			
		Description and value of any property transferred	Date payment	Amount of payment
			or transfer was made	
	Miller, Mike	Correct Law Firm	2/1/2016	\$500.00
	Person Who Was Paid	Semrad Law Firm - 500.00	2/1/2010	φοσο.σο
		- 500.00		
	Number Street			
		_		
	City State Zip Code			
	Fracil or wakaita addinasa	_		
	Email or website address			
	Person Who Made the Payment, if Not You	-		
			1	
	Person Who Was Paid	-		-
		_		
	Number Street			
	-	_		
	City State Zip Code	_		
	Facell as website address	_		
	Email or website address			
	Person Who Made the Payment, if Not You	-		
	The mass side aymong in the row		1	

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17.	you	deal with your creditors	d for bankruptcy, did you or or to make payments to you transfer that you listed on line 1	r creditors?	ng on your behalf pay o	r transfer any p	roperty to anyor	ne who p	promised to help
		No Yes. Fill in the details.							
				Description and	value of any property	transferred	Date payment or transfer was made	Amoui	nt of payment
		Person Who Was Paid							
		Number Street							
		City Sta	te Zip Code						
18.	Inclu trans	nary course of your busi	led for bankruptcy, did you siness or financial affairs? and transfers made as security listed on this statement.					-	
				Description and property transfe	_		property or paym bts paid in exch		Date transfer was made
		Person Who Received Tr	ransfer						
		Number Street							
		City Sta Person's relationship to y	•						
		Person Who Received Tr	ransfer						
		Number Street							
		City Sta Person's relationship to y							
19.		nin 10 years before you f se are often called asset-p	riled for bankruptcy, did you protection devices.)	transfer any propo	erty to a self-settled tru	st or similar de	vice of which yo	u are a k	peneficiary?
		No							
	Ц	Yes. Fill in the details.		Description and	I value of the property	transferred			Date transfer was made
		Name of trust							

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

Debtor 1 JennifeCase 16-03048 ADoc 1 First Name Middle Name Page 43 of 60 Document Mitme

	or tra	ansferred?	gs, money ma	rket, or other finar	icial account			in your name, or for yo		
		No Yes. Fill in the deta	ails.							
					Last numl	4 digits of account per	Type o instrui	f account or ment	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
		Person Who Was	Paid		XXXX	′ -		necking Ivings		
		Number Street						oney market okerage		
		City	State	Zip Code			☐ Ot	her		
		Person Who Was	Paid		XXXX	(-		necking		
		Number Street						oney market okerage		
		City	State	Zip Code	 ;		Ot	her		
		ou now have, or oables?	did you have	within 1 year be	fore you file	ed for bankruptcy, a	ny safe depos	it box or other deposit	ory for securities,	cash, or other
	valua			within 1 year be		ed for bankruptcy, a	ny safe depos	it box or other deposit		cash, or other Do you still have it?
	valua	ables? No		within 1 year be			ny safe depos			Do you still
	valua	ables? No Yes. Fill in the deta	ails.	within 1 year be		had access to it?	ny safe depos			Do you still
	valua	ables? No Yes. Fill in the deta	ails.	within 1 year be	Who else		ny safe depos			Do you still have it?
	valua	ables? No Yes. Fill in the deta	ails.	within 1 year be	Who else	had access to it?	zip Code			Do you still have it?
	valua	No Yes. Fill in the deta Name of Financia Number Street City	ails. Il Institution State	Zip Code	Who else Name Number City	had access to it? Street State	Zip Code		nts	Do you still have it?
22.	Have	No Yes. Fill in the deta Name of Financia Number Street City you stored prop	ails. Il Institution State perty in a stor	Zip Code	Who else Name Number City	had access to it? Street State	Zip Code	Describe the conten	nts	Do you still have it?
22.	Have	No Yes. Fill in the deta Name of Financia Number Street City e you stored prop	ails. Il Institution State perty in a stor	Zip Code	Who else Name Number City	had access to it? Street State	Zip Code	Describe the conten	y?	Do you still have it?
22.	Have	No Yes. Fill in the deta Name of Financia Number Street City you stored prop	all Institution State perty in a stormails.	Zip Code	Who else Name Number City	Street State your home within	Zip Code	Describe the content	y?	Do you still have it? No Yes Do you still have it?
22.	Have	No Yes. Fill in the deta Name of Financia Number Street City e you stored prop No Yes. Fill in the deta	all Institution State perty in a stormails.	Zip Code	Name Number City e other than	Street State your home within	Zip Code	Describe the content	y?	Do you still have it? No Yes Do you still have it?

art	9: l	dentify Property You Hold or Contro	DOCUM I for Some	•	ge 44 of 60		
23.	✓	ou hold or control any property that someone	e else owns?	Include any pro	operty you borro	owed from, are storing for, or hold in tr	ust for someone.
	ш	Yes. Fill in the details.	Where is t	he property?		Describe the contents	Value
						_	
		Owner's Name	Number St	reet			
		Number Street	City	State	Zip Code	-	
		City State Zip Code	_				
art	10:	Give Details About Environmental In	formation				
		urpose of Part 10, the following definitions apply:					
Rep	Sin or Hat tox	cluding statutes or regulations controlling the clear to means any location, facility, or property as define used to own, operate, or utilize it, including disposazardous material means anything an environment kic substance, hazardous material, pollutant, contain notices, releases, and proceedings that you know any governmental unit notified you that you respectively. Fill in the details.	ed under any er sal sites. al law defines a aminant, or sim about, regardl	nvironmental law as a hazardous v nilar term. less of when the or potentially li	whether you now vaste, hazardous s	substance,	Date of notice
		Name of site	Couraman	tal . mit		-	
			Governmen			_	
		Number Street	Number St	reet			
		City State Zip Code	City	State	Zip Code	-	
25.	Have	you notified any governmental unit of any re	lease of haza	ardous material	?		
		No Yes. Fill in the details.	0			F	Potenti di
			Governme	ntal unit		Environmental law, if you know it	Date of notice
			Governmen			Environmental law, if you know it	Date of notice
		Yes. Fill in the details.		tal unit		Environmental law, if you know it	Date of notice

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Debto	or 1	JennifeCase 16-03048 First Name	ADOC 1 Fi	led 02\$011/\$16 Documenter	Entered 02/01 age 45 of 60	h16 Ario 5: <u>48</u>	Desc Main
26.	Hav	e you been a party in any judio	cial or administrativ	e proceeding under an	ny environmental law	? Include settlements	and orders.
	✓	No Yes. Fill in the details.					
'		res. I ili ili tile details.	(Court or agency		Nature of the case	Status of the case
		Case title					Pending
				Court Name			On appeal
			Ī	Number Street			Concluded
		Case number	(City State	Zip Code		
Part 1	1:	Give Details About Your	Business or C	onnections to Any	Business		
27.	With	nin 4 years before you filed for	bankruptcy, did yo	u own a business or ha	ave any of the follow	ing connections to an	y business?
		A sole proprietor or self-em		•	•	-time	
		A member of a limited liabil A partner in a partnership	ity company (LLC) or	limited liability partnersh	nip (LLP)		
		An officer, director, or mana	aging executive of a c	orporation			
_		An owner of at least 5% of	the voting or equity so	ecurities of a corporation			
		No. None of the above applies. Or Yes. Check all that apply above a		elow for each business			
	_	Tool of took all that apply above		Describe the natu	re of the business		entification number Do not al Security number or ITIN.
		Business Name				EIN:	
		Number Street		Name of accounta	ant or bookkeeper	Dates busine	ess existed
		City State	Zip Code		·	From	To
				Describe the natu	re of the business		entification number Do not al Security number or ITIN.
		Business Name				EIN:	
		Number Street		Name of accounta	ant or bookkeeper	Dates busine	ess existed
		City State	Zip Code			From	To
				Describe the natu	re of the business		entification number Do not al Security number or ITIN.
		Business Name		_		EIN:	
		Number Street		— Name of accounta	ant or bookkeeper	Dates busine	ess existed
		City State	Zip Code			From	To

Debtor		<u>oc 1 Filed 02≴0√ul/s⊾6</u>	Entered 02/01/16/147:05:48	Desc Main
	First Name Middle	Document Document	Page 46 of 60	
	ithin 2 years before you filed for bankr editors, or other parties.	uptcy, did you give a financial st	atement to anyone about your business? Inc	lude all financial institutions,
<u>~</u>	No Yes. Fill in the details below.			
_	1 100. This is the declare bolow.	Date issued		
	Name	MM/DD/YYYY		
	Number Street			
	City State	Zip Code		
Part 12	: Sign Below			
and	I correct. I understand that making a fa	lse statement, concealing prope	achments, and I declare under penalty of perjecty, or obtaining money or property by fraud to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15	in connection with a
	Signature of Debtor 1		Signature of Debtor 2	
	Date 2/1/2016		Date	
Dic	you attach additional pages to Your S	tatement of Financial Affairs for	Individuals Filing for Bankruptcy (Official Fo	orm 107)?
✓	No			
	Yes			
Dic	you pay or agree to pay someone who	is not an attamanta balance. E	Il out bankruptcy forms?	
✓		is not an attorney to neip you ti		
	No	is not an attorney to neip you n		
	No Yes. Name of person	is not an attorney to neip you ti	Attach the Bankruptcy Petition I Declaration, and Signature (Off	•

Fill in this informa	Case 16-0304 ation to identify your cas		02/01/16	ed 02/01/16 17:05:48	Desc Main
Debtor 1	Jennifer	A	Sowinski		
Dobtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	Northern	District of Illinois		
			(State)		
Case number (If known)					
()					Check if this is an
Official F	orm 108				amended filing
Stateme	nt of Intenti	on for Individu	ıals Filing Un	der Chapter 7	12/15
■ creditors have■ you have leasYou must file this	e claims secured by you sed personal property s form with the court w	and the lease has not expire within 30 days after you file	ed. your bankruptcy petition	or by the date set for the meetings to the creditors and lessors yo	,
	eople are filing togethe ust sign and date the		qually responsible for su	pplying correct information.	
•	and accurate as possi and case number (if k	•	d, attach a separate sheet	to this form. On the top of any a	dditional pages,

Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Wibelow.	ho Have Claims Secured by Property (Official Form	106D), fill in the information
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.

tor Jennifer 16-030 First Name	48 ADoc 1 Filed 02 Middle Name Docum	/01/16 Entered 02/01/16 2 Sowinski Page 48 of 60 Last Name	17:05:48 Desc Main
	Personal Property Leases	Lust Name	
mation below. Do not list real		are leases that are still in effect; the lease	ed Leases (Official Form 106G), fill in the eperiod has not yet ended. You may assume
Describe your unexpired perso	onal property leases		Will the lease be assumed?
essor's name:			☐ No ☐ Yes
Description of leased roperty:			
essor's name:			☐ No ☐ Yes
Description of leased roperty:			
essor's name:			☐ No ☐ Yes
Description of leased roperty:			
essor's name:			No Yes
Description of leased roperty:			
essor's name:			☐ No ☐ Yes
escription of leased roperty:			
essor's name:			☐ No ☐ Yes
description of leased roperty:			
essor's name:			No Yes
Description of leased roperty:			
Sign Below			
nder penalty of perjury, I decla at is subject to an unexpired		tion about any property of my estate tha	t secures a debt and any personal property

✗ /s/ Jennifer Sowinski	*
Signature of Debtor 1	Signature of Debtor 1
Date 2/1/2016	Date

MM/DD/YYYY

MM/DD/YYYY

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

re	Jennifer Sowinski	Case No.	
	Debtor		(If known)
		Chapter	Chapter 7
	DISCLOSURE O	COMPENSATION OF ATTORNEY FOR DEBT	TOR
1.		2. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that comor agreed to be paid to me, for services rendered or to be rendered on behalf of the ws:	
	For legal services, I have agreed to accept		\$843.00
	Prior to the filing of this statement I have received	ı	\$93.00
	Balance Due		\$750.00
2.	The source of the compensation paid to me was: Debtor	Other (specify)	
3.	The source of the compensation paid to me is: Debtor	Other (specify)	
4.	I have not agreed to share the above-disclosmembers and associates of my law firm.	ed compensation with any other person unless they are	
		compensation with a other person or persons who are not by of the agreement, together with a list of the names of ttached.	
5.		ed to render legal service for all aspects of the bankruptcy case, including: n, and rendering advice to the debtor in determining whether to file a petition in bar	nkruptcy;
	b. Preparation and filing of any petition, so	nedules, statements of affairs and plan which may be required;	
	c. Representation of the debtor at the mee	ting of creditors and confirmation hearing, and any adjourned hearings thereof;	
6.	By agreement with the debtor(s), the above-disc	osed fee does not include the following services:	
		CERTIFICATION	
	I certify that the foregoing is a complete statement eedings.	of any agreement or arrangement for payment to me for representation of the debto	or(s) in this bankruptcy
	2/1/2016	/s/ Mike Miller	
	Date	Signature of Attorney	
		Semrad Law Firm	
		Name of law firm	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

		filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-03048 Doc 1 Filed 02/01/16 Entered 02/01/16 17:05:48 Desc Main UNITED STATES BANKBURICY COURT Northern District of Illinois

In re:	Sowinski, Jennifer A	Case No			
	Debtor(s)				
		Chapter.	Chapter7		
	VERIFICATION OF CREDITOR MATRIX				
	The above named Debtors hereby verify that the a	ttached list of creditors is true and	d correct to the best of their know	vledge.	
Date:	2/1/2016	/s/ Sowinski, Jennifer	A		
		Sowinski Jennifer A			

Signature of Debtor

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First forme	Madellen	Lost Name	
Part 6: Answer These Qu	extions for Reporting Purpo	ses	
16. What kind of debts do you have?	as *incurred by an indivi No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primari obtain money for a busin investment. No. Go to line 16c. Yes. Go to line 17.	ily consumer debts? Consumer debts a idual primarily for a personal, family, or ily business debts? Business debts ar ness or investment or through the opera you owe that are not consumer debts or	household purpose," c dobts that you incurred to ation of the business or
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid tha funds will be available for distribution to unsecured creditors?	paid that funds will be avail No. Yes.	ter 7. Go to line 18. Do you estimate that after any exempt property is liable to distribute to unsecured creditors?	excluded and administrative expenses are
18. How many creditors do you estimate that you owe?	☑ 1-49 □ 50-99 □ 100-199 □ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	S0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	S1,000,001-S10 million S10,000,001-S50 million S50,000,001-\$100 million S100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	□ \$0-\$50,000 ☑ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	S1,000,001-S10 million S10,000,001-S50 million S50,000,001-\$100 million S100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$60 billion
Part7: Sign Below	HE-RESPONDED CONTRACTOR CONTRACTOR	Will the state of	194V 100 NATIONAL COLUMN
Foryou	and correct. If I have chosen to file under or 13 of title 11, United States proceed under Chapter 7. If no atterney represents me fill out this document, I have a linearist relief in accordance I understand making a false s connection with a bankruptcy or both, 18 U.S.C. §§ 152, 13	2/01x	sed, if eligible, under Chapter 7, 11,12, under each chapter, and I choose to one who is not an attorney to help me y 11 U.S.C. § 342(b), as Code, specified in this petition, ning money or property by traud in 0, or imprisonment for up to 20 years,
	Signature of Debtor 1 Executed on 2/1/2016	Signature Executer	d on

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		Docum	nent Page 56 of 6	0	
Fill in this infor	mation to identity your case:			I .	
Debtor 1	Jennifer	A	Sowinski		
Debtor 2	First Name	Midde Name	Last Name		
(Spouse, if file	9) First Name	Middle Name	Last Name		
United States i	Bankruptcy Court for the: N	ortham	District of Illinois	20	
Case number			(State)		
(If knewn)		100	/		
Official	Form 106Dec		V.		Gheck if this is an amended filing
Declara	tion About an I	ndividual De	btor's Schedules		12/15
(Cause mession)	manufaces filling togather b	olib ara aguallu rasponali	ole for supplying correct inform:	ation.	
Part 1: Sign		who is NOT an attorney	to help you fill out bankruptcy f	orms?	
☑ No	ny or agrav to pay soundar	wild tall of all all only	to map you mi out out on the proy i	311131	
Yes.	Name of person		Attach Bankruptcy Petition Signature (Official Form 11	Preparer's Notice, Declaration, and 9).	
that they	inality of perjury, I declare the are true and correct; for Sowinski	at I have fead the summa	ry and schedules filed with this Signature of De		
Date 2/t/	2016		Date		

MM/DD/YYYY

MM/DD/YYYY

Debtor 1		16-03048	Doc 1	Filed 02/01/16 Document	Entered 02/01/16 17:05:48 Page 57 of 60	Desc Main
	Frai Name		Middle histore	Led Name	- 1360 CONCHOUSE VII D	
	hin 2 years t ditors, or oth		bankruptcy, di	d you give a financial et	alement to anyone about your business? Incli	ude all financial institutions,
	No Yes, Fill in th	e details below.		- Land Control (1997)		
				Date Issued		
	Name	Merit		MM/DD/YYYY		
	Number	Street	-			
	City	State	Zip Cod	SC .		
_		000000	2005/2006			
et 12	Sign Be	ow				
and	correct. I un gruptcy case	derstand that mak	ing a false stat	ement, concealing prop	lachments, and I declare under penalty of perjuents, or obtaining money or property by fraud or to 20 years, or both, 18 U.S.C. §§ 152, 1341, 15	n connection with a
	×	Ist Jernifer Sow Signature of Dobto		-1521 :-	Signature of Doblor 2	
		Signaturo or circuro		1	Date	
		Date 2/1/2016			Disc	
Did	vou attach a	dditional pages to	Your Statemer	vt of Financial Affairs fo	r Individuals Filing for Bankruptcy (Official Fo	rm 107)?
-	ilana I	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			•	
_						
П	No Yes					
	Yes	gree to pay some	ne who is not :	an attorney to help you	fill out bankrupley forms?	
Did	Yes you pay or a	gree to pay someo	na who is not :	an attorney to help you	fill out bankrupley forms?	
Did	Yes		ne who is not :	an attorney to help you	fill out bankruptcy forms? Attach the Bankruptcy Pettion I	Yeperer's Notice,

gl

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Case number (# Sowinski Debtor Jonnifer First Name Middle Name Last Name List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)[2). Will the lease be assumed? Describe your unexpired personal property leases Lessor's name. Description of leased property: Lessor's name: Yes Description of leased property: ☐ No Lesson's name. ☐ Yes Description of leased property: No Leasor's name: Yes Description of leased property: ☐ No Lessors name: Yes Description of leased property: No. Lessor's name: Yes Discription of leased property: No Lessor's name: Description of leased property: Paris: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a determination and personal property that is subject to an unexpired lease. X /s/ Jennifer Sowinski Signature of Debtor 1 Signature of Debtor 1 Date 2/1/2016 Date MM/DDYYYY MM/DD/YYYY

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In.re:	Sowinski, Jennifer A	Case No.
	Dehtor(s)	Case NO.
		Chapter7
	VERI	ICATION OF CREDITOR MATRIX
Th	e above named Debtors hereby verif	that the attached list of creditors is true and correct to the best of their knowledge.
Dale:	2/1/2016	/s/ Sowinski, Jennifor A
Dale.	21/2016	
		Sowinski, Jennifer A, Signature of Dobtor



Entered 02/01/16 17:05:48 Case 16-03048 Doc 1 Filed 02/01/16 Desc Main Document Page 60 of 60 Debtor 1 Jennfer Sowinski Case number (Cknowl) Column A Column B. Debtor 1 Debtor 2 or non-filling spouse 8. Unemployment compensation \$0.00 Duriet enter the amount if you contend that the amount received was a benefit under the Social Security Act, Instead, list it here: For you \$0.00 For your spouse \$0.00 9.Pension or retirement income. Do not include any amount received that was a \$0.00 bonefit under the Social Scounty Act, 10.Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments: received as a victim of a war crime, a crime against humanity, or international or domestic temprism. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any \$0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for each \$998.20 \$26370 column. Then add the total for Column A to the total for Column B. Total current monthly Income 25772 Dotormine Whether the Means Tost Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11, Copy line 11 horo -\$900.20 Multiply by 12 (the number of months in a year). X 12 12b. The result is your annual income for this part of the form, 12b \$11,978.36 13 Calculate the median family income that applies to you. Follow those steps: Hinois Fill in the state in which you live. 1 Fill in the number of people in your household. Fill in the median family income for your state and size of household, \$49,002.00 to find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy donk's office. 14. How do the lines compare? 14a. There is no presumption of abuse.
14a. There is no presumption of abuse. Go to Part 3. 14b. Une 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and 18 out Form 122A-2. Perist Sign Below By signing horn, I doctare under penalty of perjuty that the information on this statement and in any attachments is true and correct. X Isl Jennifer Sowinski Signature of Debtor 1 Signature of Debter 2 Date 2/1/2016 MM/DO/YYYY MM/DD/YYYY If you checked line 14a, do NOT fill out or file Form 122A-2, If you checked line 14b, fill out Form 122A-2 and file it with this form.